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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\***

09/690615  
 THIS APPLICATION IS A CIP OF 09/690,015 10/17/2000 \* C112 4/14/04  
 (\*) Data inconsistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\***

None C112 4/14/04

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 4	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Carl M. Zysman</i> C112 Examiner's Signature Initials				

**ADDRESS**

22249

**TITLE**

Systems and methods for communicating with implantable devices

FILING FEE RECEIVED 597	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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